

IN FOCUS

Rural Homelessness: Identifying and Understanding the “Hidden Homeless”

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The June issue of *In Focus* provides a synthesis of recent literature on rural homelessness. Homelessness is often conceptualized as an urban issue, which is reflected by the dearth of research on homelessness in rural areas. In reality, homelessness is pervasive in rural communities due to high rates of poverty, unemployment or under-employment, lack of affordable housing, and geographic isolation. This issue of *In Focus* will address the changing rural landscape, challenges to identifying the homeless population, patterns of homelessness, service access and delivery barriers, and promising practices in service delivery in the context of rural settings. A few limitations exist regarding the literature shared, namely the specificity of studies to certain rural communities and some outdated references due to a lack of recent literature on the topic.

Changing Rural Landscape

In the United States, a number of trends have altered the character and culture of rural communities, many of them at odds with the idyllic image of small town life. Corporate takeovers of family farms, restructuring of industries, in-migration of ethnically diverse populations, out-migration of young people, and the rising average age of the rural population are all factors that have changed the rural landscape.^[1] Along with these trends, social problems stereotypical of urban areas have emerged, including poverty, adult and youth homelessness, increasing crime rates, drug addiction, and minority-majority group conflicts in places with new immigrant populations.^[1, 2] A number of factors have contributed to rural poverty and homelessness, including a lack of affordable housing, especially in proximity to employment opportunities; prevalence of low-wage service occupations; lack of infrastructure to support employment (e.g. child care and public transportation); inadequate treatment opportunities for medical and behavioral health problems; natural disasters; and domestic violence.^[1, 3-5]

Identifying the Rural Homeless Population

A major challenge in the study of rural homelessness is the inability to accurately identify and quantify the population. One issue is the prevalent lack of awareness or recognition of homelessness in rural areas.^[1, 5-7] Recognition of rural homelessness is limited for a few reasons: rural landscapes camouflage homelessness through expansive geography with low population density, unstably housed individuals reside in less visible locations than in urban areas (wilderness, substandard housing, doubling up, etc.), and cultural norms deny that homelessness can exist in the idealized rural setting and aim to rid communities of this “social problem.”^[1, 6] Methodological concerns also exist in the identification of the rural homeless, including competing statutory definitions of “homeless” and “rural” held by federal agencies, issues in locating this “hidden population,” and challenges accurately sampling the population.^[5, 7] Methods used to enumerate the urban homeless are not as effective in rural areas. For example, urban counts have often been based upon the number of homeless service users in an area, but this method likely undercounts the homeless

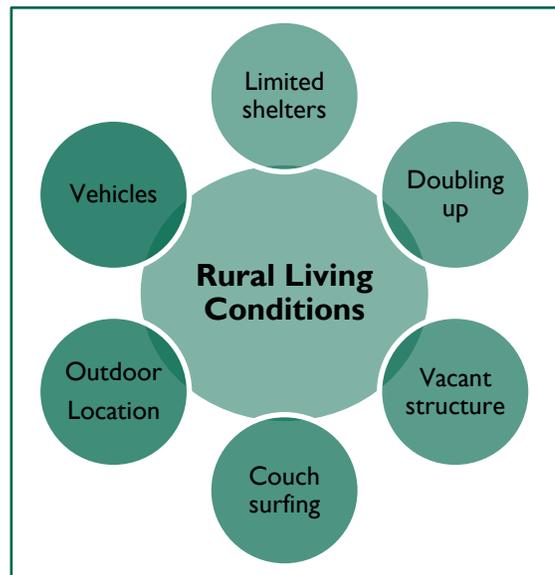
Challenges Identifying the Rural Homeless:

- Urban methodology insufficient
- Competing definitions of “rural” and “homeless”
- Lack of awareness or recognition of homelessness

population in rural communities due to the lack of service sites.^[5] Another method has been to extrapolate rural homeless estimates from rates in urban areas.^[5] Because of these methodological issues and data limitations, comparing the prevalence and variation in characteristics of homeless populations in rural and urban areas can be problematic.^[5, 7]

Patterns of Rural Homelessness

Patterns of rural homelessness are often less visible than those in urban areas, with individuals spread out in remote locations.^[8] Due to a desire to remain in rural communities or few options to leave, individuals often settle for substandard living conditions.^[6] Common places of residence include a limited number of shelters; doubling up with family or friends, including in units on tribal lands; severely substandard structures that would likely be condemned in urban areas; couch surfing, especially among youth; outdoor locations; vehicles; and abandoned buildings.^[7] For those doubling up in rural areas, it is a common cultural norm based upon the belief of taking care of one’s own; however, severely overcrowded living situations have been associated with domestic violence and child abuse.^[7] For those residing in less visible locations, it may be a conscious desire to remain hidden from abusers, parents, creditors, or police.^[7] Although some unstably housed individuals remain in the same community, families with children often become hypermobile due to economic insecurity and inadequate housing, leading to social isolation.^[9] Children in unstably housed rural families often experience academic struggles and difficulty obtaining services.^[10] Levels of perceived visibility, local status, and mobility can dictate the community perceptions and anti-homeless rhetoric that unstably housed individuals face in rural areas, with the most preferential type being someone who is local, settled, and invisible.^[6] This mentality speaks to the lack of awareness and acceptance of homelessness in rural areas.



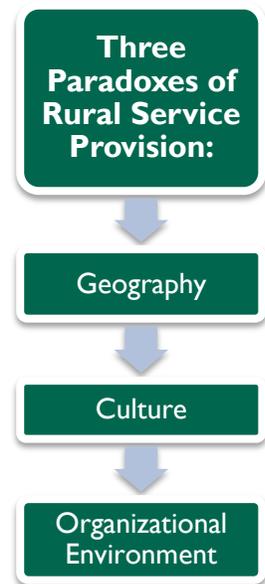
Service Access and Delivery Barriers

Rural areas are far from homogenous. Their unique, local dynamics can shape the experiences of unstably housed individuals and the way in which homeless services are designed and delivered.^[1, 6] Geography can affect the type of viable living conditions in a community. Rural social structures and attitudes toward homelessness can even influence community responses between the extremes of marginalization and generosity, resulting in resource-rich and resource-poor rural areas.^[6] A number of structural barriers inhibit the access to and provision of services across rural settings, including a limited number of homeless-specific services, lack of institutional capacity and staff, provider shortages, limited shelter beds, lack of affordable housing, large service areas, dispersed populations, lack of public transportation, lack of outreach to engage individuals in services, individuals’ reluctance to seek outside assistance, and individuals’ desires for privacy.^[5, 7, 8, 11]

Organizations encounter many challenges in service delivery due to the unique rural dynamics in which they operate. Edwards et al.^[11] identified three paradoxes in the provision of services in rural communities, demonstrating how local dynamics influenced community responses to homelessness. The first paradox was geography. In some areas, geographic isolation mobilized small towns to provide resource-rich environments for those experiencing homelessness through a collaborative response. However, Edwards et al. found this to rarely be the case, with poorer subsets of the population actually becoming more isolated at the remote margins of town. Geography also hindered residents from service utilization, created transportation issues, and produced issues of efficiency and scale for providers serving a geographically dispersed population.

The second paradox, culture, was demonstrated by competing values that influenced residents’ levels of awareness, approval or disapproval, and solutions to addressing homelessness. On the one hand, rural communities demonstrated a commitment to taking care of one’s own, which improved community responsiveness, while simultaneously valuing the individuation of problems, self-reliance, and privacy, which hindered community action.

The final paradox, organizational environment, demonstrated how state and local government agencies affected the service infrastructure in rural areas. Most agencies operated autonomously, providing singular services (e.g. food stamps), with little integration, coordination, or awareness of each other, disputing the rural stereotype of a tight-knit community. A report by the U.S. Government Accountability Office (GAO) found a similar lack of integration among programs funded by the Departments of Health and Human Services (HHS) and Housing and Urban Development (HUD) in rural communities.^[7] Given the breadth of geographic and cultural barriers rural communities already face, the effects of limited collaboration are especially detrimental.



Promising Practices in Rural Service Delivery

Although limited research exists regarding effective rural service models^[5], some emerging practices have been identified. These strategies, which are not limited to rural settings, include the integration of behavioral health and primary care to reduce stigma of behavioral health issues, the provision of transportation assistance,

coordinated service delivery to maintain continuity of care, increased outreach in remote areas, use of community networks and peer navigators to facilitate mobile outreach, the continuum of care approach to increase awareness of complementary services in community, the promotion of cultural competence among staff, development of community coalitions and rural service teams, regionalized services, the housing-plus-services model, and employment initiatives to train the local workforce.^[4, 5, 12] In addition to increasing access to services, Probst et al.^[13] found that the presence of community health centers¹ and rural health clinics in rural communities limited county-level rates of hospitalization for ambulatory care sensitive (ACS) conditions, especially for older adults.

Promising Practices:

- Behavioral health and primary care integration
- Transportation assistance
- Continuity of care across community providers
- Increase outreach in remote areas
- Use of community networks/peer navigators for outreach
- Promotion of cultural competence among staff
- Development of community coalitions/rural service teams
- Regionalized services
- Housing-plus-services model
- Employment initiatives to train local workforce

Implications

The field of rural homelessness merits further study, as homelessness is not an exclusively urban problem. The patterns in which homelessness unfolds in rural settings differ from urban settings, necessitating tailored approaches in public policy and service design. New methodology is needed to effectively identify and enumerate the rural homeless population so that more accurate comparisons can be made with the urban homeless population. Once population characteristics and needs are identified, service infrastructures can be evaluated and

¹ The term “Community Health Center” is not defined in the section 330 statute, and there is no universal agreement on its meaning. It is commonly used to refer to the subset of Health Center Program grantees that receive funding to target a general underserved community or population.

redesigned to more effectively match rural settings, taking into consideration geography, culture, and organizational environment.

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